SEE INSTRUCTIONS ON REVERSE. TYPE	OR PRINT CL	EARLY.		
BUSINESS NAME				PERMITNUMBER
FIRSTNAME	M.I.	LAST NAME		
MAILING ADDRESS				DAY TELEPHONE
CITY	STATE	ZIP CODE + 4		EVENING TELEPHONE
LIST ANIMALS TO BE ACQUIRED (Species	s, age, sex, nui	mber):		
FIRST NAME	M.I.	LAST NAME		DAY TELEPHONE
MAILING ADDRESS				
CITY	STATE	ZIP CODE + 4		
NAME OF VETERINARIAN ISSUING HEALTH CERTIFICATE VETERINARIAN'S I			VETERINARIAN'S DA	Y TELEPHONE
the cervid(s) have not been in contact v days prior to entry into California. 3. A copy of the official results from tests methods used and the results for each 4. The Department of Fish and Game (D	with animals of conducted in the cervid shall be over the conducted in the cervid shall reserved.	test that the animals being imported into C funknown brucellosis status. Cervids six the state of origin shall be submitted with e included. Serve the right to require additional testing it. The DFG shall provide written notifical	months of age or older shape the Cervidae Importation ag prior to importation when the control of the control o	all be tested for brucellosis within 30 Application. Information on the test
5. An approved copy of this application m			_	
I certify that all information on this application	on is true and o	correct. I further certify that I will abide b	y the conditions set forth	above. DATE
X				
FOR DEPARTMENT OF FISH AND GAME U	SE ONLY			
STATUS OF APPLICATION (CHECK ONE) *REASON		PROVED DENIED* DHO)LD*	
REVIEWED BY: (Wildlife Investigations Lab	b)			DATE

LAS 9000 WHITE - PERMITTEE YELLOW - WIL PINK - LRB FG 1670 (8/02)

INSTRUCTIONS FOR COMPLETING THE CERVIDAE IMPORTATION APPLICATION

Use this form to request importing cervidae into California. Incomplete applications will be returned and may delay the reviewal of your importation application. Please allow four to six weeks for processing your application. For more information on cervidae importation, please contact the Department of Fish and Game, Wildlife Investigations Lab at (916) 358-2790.

- 1. Complete all items.
- 2. Sign and date the application.
- 3. Provide a copy of the official test results.
- 4. Mail all copies of this application and official test results to the Department of Fish and Game, Wildlife Investigations Lab, 1701 Nimbus Road, Suite D, Rancho Cordova, CA 95670.
- 5. A signed copy will be returned to you by the Department.